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PERSPECTIVE

What Are the Benefits of Educating Nurses on Transgender Health?

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Abstract

Transgender people frequently report negative experiences in health care settings. This is often due to a lack of cultural competence from health care staff, resulting in stigmatized and discriminatory attitudes and actions. With nurses having the greatest amount of patient interaction among health care professionals, this article examines the potential benefit of educating nurses in providing culturally competent care in the interest of improving experiences of health care for transgender people. At present, very few nurses are provided with transgender inclusive training whether as students or once registered, restricting the profession from progressing toward a transgender inclusive culture with culturally competent practitioners. The article recommends that nurses are provided with transgender inclusive education both as preregistered student nurses, and as registered nurses.

Keywords: education; transgender; cultural competence; stigma; nursing

In nursing education both preregistration and as continuing professional development (CPD), there is an absence of information about the specific needs of transgender people. In addition, there is limited consideration for transgender health care in both educational nursing textbooks and nursing-based academic journals, perpetuating existing health disparities, and invisibility faced by transgender people.[1,2] As a result, nurses tend to lack key knowledge of gender diversity, and how to best care for transgender and nonbinary people in health care settings. According to VanDuyne, health care professionals "must educate themselves and be aware of the barriers if they hope to provide services and best outcomes."[3]

Many transgender people have specific health care needs such as hormone replacement therapy or transition-related surgeries that most health care professional have some awareness of. However, Grant et al. report 50% of transgender patients have been required to educate health care professionals on gender diversity and appropriate care of transgender people.[4] Such a lack of understanding results in "well-meaning heterosexual workers being insensitive to LGBT issues."[5] In addition, most health care professionals are unaware that transgender people are at greater risk of physical attack and domestic abuse than cisgender peers,[6] or of the greater incidence of poor mental health due to transphobic stigma.[7,8]

Transgender people experience significant inequalities in many areas of life through transphobic discrimination, stigmatization, and widespread denial of the validity of their identity by mainstream media. In accordance with minority stress theory,[9] transgender people may also be made ill as a result of stigmatized and discriminatory treatment. Mirroring wider society, transphobia and stigma are also present in health care services, compromising the health outcomes and health care experiences of transgender people. In the 2018 LGBT in Britain report, Stonewall found as many as 16% of transgender people were denied health care services due to their LGBT + identity.[6] The Nursing and Midwifery Council (NMC) Code of Conduct states that nurses must not express personal beliefs in an inappropriate way.[10] Regardless of personal beliefs about gender diversity, what could be less appropriate and less caring than denial of health care?

With the stigma faced by transgender people in society daily, it is unsurprising that such discrimination is

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also anticipated and experienced by transgender people when accessing health care services. As a result of anticipated prejudice, many transgender people will delay or avoid seeking care to minimize risk of prejudicial harm.[11] Unfortunately, this can lead to delayed intervention and further risk to health. To support all service users to seek early intervention thus enabling the best possible recovery outcomes, we need to play our part in reducing the discrimination many face through promotion of informed inclusivity.

At present, the UK nursing workforce is not adequately equipped to provide appropriate person-centered and culturally competent care. In line with the NMC Code of Conduct,[10] a nurse must possess an appropriate level of cultural competence so they can provide high-quality care to service users. To provide quality care to all patients, it is critical that nurses understand the patients' needs and how best to care for these. To ensure nurses can identify and attend to the health care needs of transgender people in a professional and supportive manner, it is critical nurses are taught about gender inclusive care.

At present, there is currently no requirement for undergraduate nurses in the United Kingdom or United States to learn about any aspect of LGBT+ health care, including transgender health; thus, there is very little teaching on the subject.[12] With student nurses bringing culture shifts and new evidence into practice, they are perfectly prepared to bring a greater understanding of gender inclusive health care to practice. The University of Nottingham (UK) has been working to increase understanding of transgender health in students on both BSc and graduate entry nursing courses, with emphasis on cultural competence and professionalism. This program has been well received by students, keen to ensure they are prepared to support all those who seek their care. Wider implementation on a national scale of gender inclusive nursing education would not only boost nurses' confidence and cultural competence when caring for transgender people, but also improve the experiences transgender people have when accessing health care services. In order for preregistration education to be accurate and effective, Bonvicini raises that academic faculty would also require development programs themselves.[13] Although faculty training presents with short-term time and financial costs, the resultant improvements in inclusivity and cultural competence for nurses and academic faculty are significantly more impactful.

Education can also be delivered through postregistration CPD, including well-informed equality, diversity, and inclusion (EDI) training. Existing literature repeatedly shows a lack of information on transgender-specific care in postregistration EDI training. For example, Stonewall report 72% of patient-facing hospital staff receive no training on LGBT+ health needs or appropriate language.[14] Although some UK health care trusts include transgender identity in this training, it is rarely more than a brief mention, leaving many health workers without answers or direction. Furthermore, policy and guidelines available in the United Kingdom appear to offer little insight beyond suggestive guidelines to follow. Stryker et al. found experienced medical staff to report structured clinical experience to be more beneficial than didactic teaching methods for aiding development of gender affirming care.[15] The implementation of clinical experience and mentorship in nursing practice for registered nurses would support the workforce to become more prepared as health care providers for transgender patients, with significant potential to improve health care experiences.

It is clear that there is currently a gap in nurses' knowledge of what it is to be transgender and the specific experiences and health care needs associated with gender transition. The current literature also identifies the benefits to our patients of building greater cultural competence and demonstrating acceptance and support, both in their experience of care, but also in their health outcomes. Improving nurses' understanding and awareness is key to promoting health and access to health care services among the transgender community. Therefore, it is crucial that the preregistration curriculum ensures adequate representation of gender diversity and transgender-specific health care needs. It would also be beneficial for CPD sessions on EDI to be truly inclusive and diverse, promoting equality of all genders in health care through education and destigmatization.

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Abbreviations Used

CPD = continuing professional development
EDI = equality, diversity, and inclusion
NMC = Nursing and Midwifery Council